

Are we feeding our future Pediatric Residents enough information regarding eating disorders?



Molly Stinnett, MD; Rebecca Hart, MD, MSc; Brittany Badal, MD; Adam Patterson, MD, MSc

Norton Children's and the University of Louisville School of Medicine Louisville, Kentucky

BACKGROUND

- ~ 9% of the United States population (28.8 million Americans) will have battled an eating disorder at some point in their lifetime.
- Shockingly, less than 6% of people with an eating disorder are medically diagnosed as "underweight," which is likely a direct consequence of lack of adequate medical training.
- With the growing prevalence of these disorders, a large gap in medical training has become increasingly apparent.

METHODS

- An anonymous electronic survey was distributed to interns prior to beginning the 2022-2023 academic year.
- Likert-scale and open-ended questions assessed baseline educational exposure to, confidence in diagnosis of, and knowledge of complications/admission criteria for 5 subtypes of pediatric eating disorders.
- Data were analyzed using standard descriptive statistics.

A Targeted Needs Assessment demonstrates that future Pediatric Residents are underprepared to care for pediatric patients with eating disorders.

Figure 1: Number of Hours Dedicated to Learning about Eating Disorders

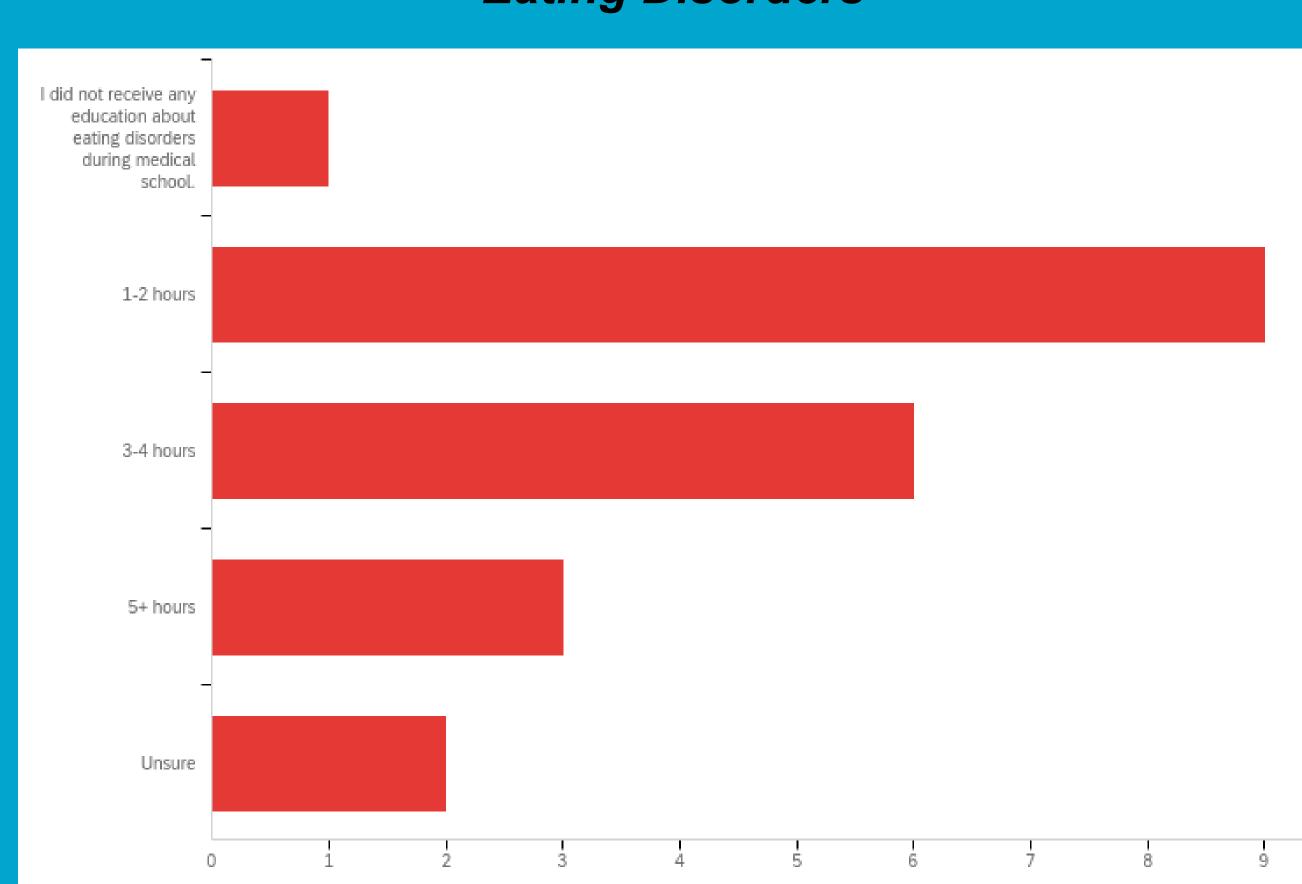


Figure 2: Pediatric Intern Comfort Level in Managing/Treating 5 Subtypes of Eating Disorders

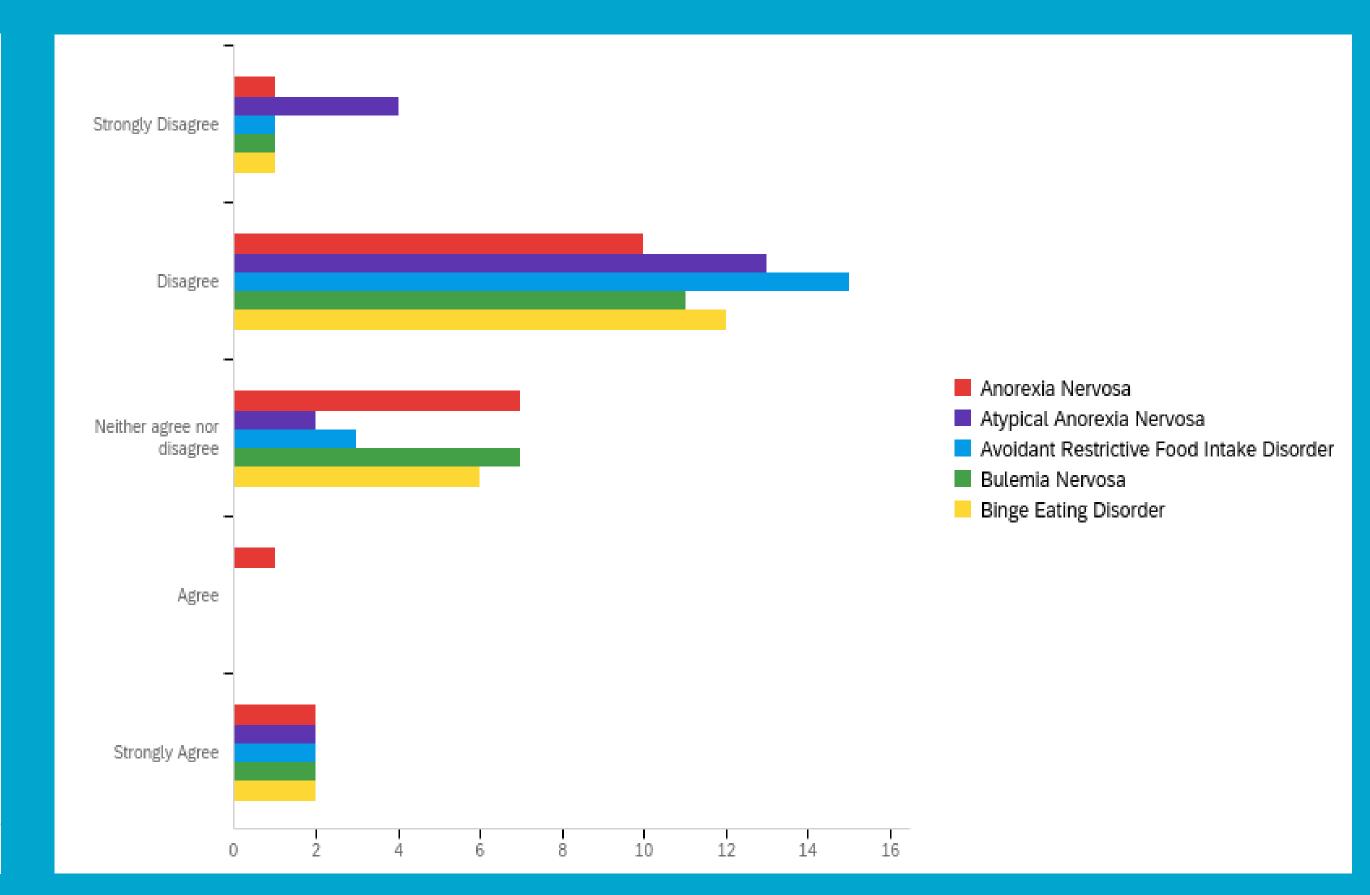


Figure 3: Identifying Admission Criteria for Patients with Eating Disorders

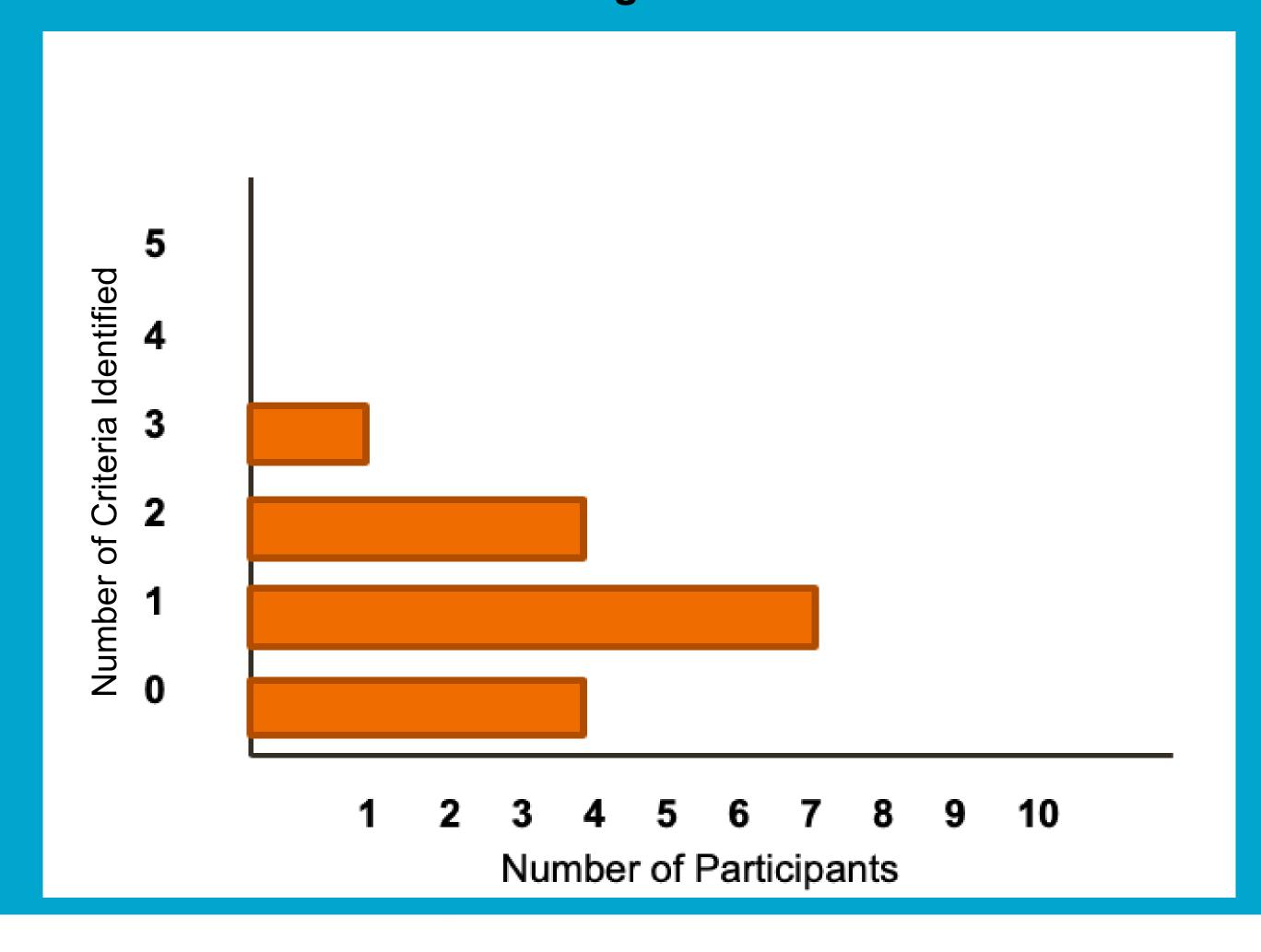
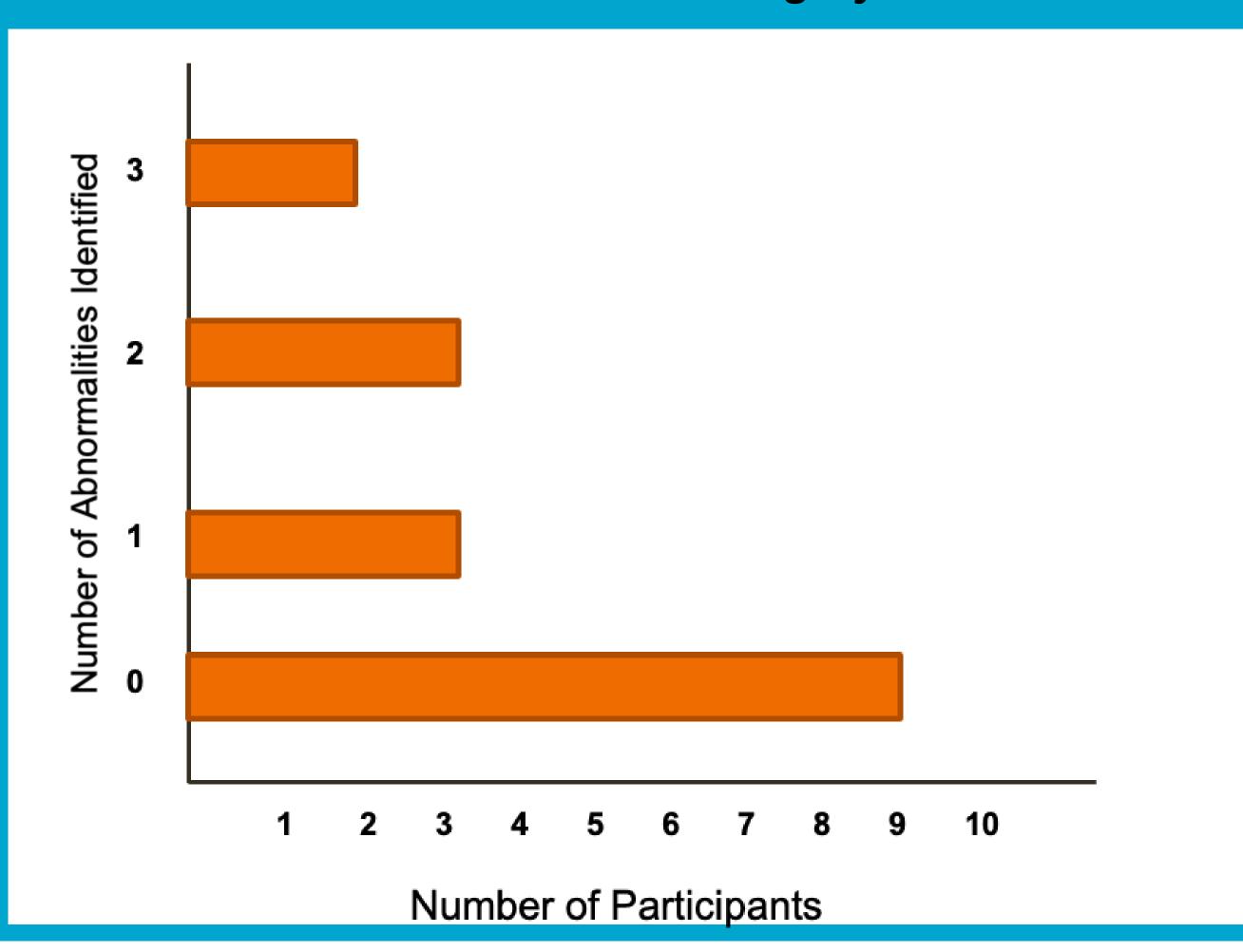


Figure 4: Identifying Electrolyte Abnormalities
Associated with Refeeding Syndrome



RESULTS

- Most interns received <2 hours of ED education in medical school (Figure 1.)
- Most interns were comfortable diagnosing anorexia nervosa (81%), bulimia nervosa (76%), and binge eating disorder (71%).
 However, very few felt comfortable diagnosing atypical anorexia (9%) and avoidant restrictive food intake disorder (ARFID, 19%.)
- Interns felt uncomfortable managing/treating patients with *any* type of eating disorder in the inpatient setting (Figure 2.)
- Only 29% of interns correctly identified more than 2/11 admission criteria for ED (Figure 3.)
- Only 47% of interns were able to correctly identify *any* lab abnormalities associated with refeeding syndrome, with none able to identify >3 (Figure 4.)

CONCLUSIONS

- We identify a gap in medical education among pediatric trainees related to diagnosis and management of pediatric eating disorders.
- Given the morbidity and mortality associated with ED, it is crucial to introduce educational interventions targeting medical trainees.
- We plan to utilize this needs assessment to develop an innovative, case-based curriculum aimed at educating upcoming Pediatric Residents about the inpatient management and treatment of eating disorders.